MCDONNELL DOUGLAS

McDonnell Douglas Realty Company

December 23, 1996 MDRC-SMS-243 Transmitted Via Federal Express

Department of Toxic Substances Control 400 P Street, Fourth Floor Sacramento, California 95812-0806

Attention: Tiered Permitting Program

Gentlemen:

Enclosed you will find our completed Tiered Permitting Phase I Environmental Assessment Checklist, our Signature and Certification for Permit-By Rule and Conditional Authorization as well as our Phase I Environmental Assessment for the property designated in the Facility Information section of your DTSC 1151 form. Based upon discussions with Jim Ross of the Los Angeles Regional Water Quality Board as well as Karen Baker of the DTSC, it is our understanding that the RWQCB has been designated as the lead agency for the property.

Please contact the undersigned at (310) 627-3014 in the event you have any questions concerning the enclosures.

Very truly yours,

S. Mario Stavale Project Manager

Enclosures:Noted

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TIERED PERMITTING PHASE I ENVIRONMENTAL ASSESSMENT CHECKLIST

SECTION I: FACILITY INFORMATION			
Instructions: Complete the following descriptive information about your facility. This information accurately describes the location of your facility and establishes mailing and phone contacts. If facility location and mailing address are identical, you may put "same" into facility mailing address spaces.			
Type of Permit: Permit by Rule Conditional Authorization X			
1. CURRENT FACILITY NAME: McDonnell Douglas Realty Company			
PAST NAMES (Attach additional pages if necessary): Douglas Aircraft Company			
2. EPA I.D. NUMBER: CAD 086 510 005			
3. NAME OF FACILITY OWNER (see definition of owner): McDonnell Douglas Realty Company			
4. NAME OF FACILITY OPERATOR: Douglas Aircraft Company			
5. NAME OF PROPERTY OWNER: McDonnell Douglas Realty Company			
6. FACILITY LOCATION ADDRESS:			
STREET: 19503 S. Normandie Ave.			
CTTY: Los Angeles			
COUNTY: Los Angeles			
STATE: CA ZIP CODE: 90502			
7. FACILITY MAILING ADDRESS (if different from FACILITY LOCATION ADDRESS):			
STREET: 4060 Lakewood Blvd. 6th Floor			
CITY: Long Beach			
STATE: CA ZIP CODE: 90808-1700			
8. FACILITY TELEPHONE NUMBER:			
9. FACILITY FAX NUMBER: 310-627-3109			
10. NAME OF FACILITY CONTACT PERSON: Mario Stavale			
11. TITLE OF FACILITY CONTACT PERSON: Project Manager - Real Estate			
12. PHONE NUMBER OF FACILITY CONTACT PERSON: 310-627-3014			
13. ADDRESS OF FACILITY CONTACT PERSON:			
STREET: 4060 Lakewood Blvd. 6th Floor			
CITY: Long Beach			
STATE: CA ZIP CODE: 90808-1700 .			

DTSC 1151 (9/95)

Please indicate total number of pages _____ of ____

DTSC 1151 (9/95)

TIERED PERMITTING PHASE I ENVIRONMENTAL ASSESSMENT CHECKLIST

SIGNATURE AND CERTIFICATION FOR PERMIT-BY-RULE AND CONDITIONAL AUTHORIZATION

Instructions: Carefully read the certification below. If you feel uncomfortable signing this certification, review the instructions and the information developed in the preparation of the checklist and correct any deficiencies you have found. Be sure that you check one of the boxes below to record your decision regarding further investigation. If you are claiming exemption from completing a Phase I Environmental Assessment, complete that section below.

Yes, further investigation is needed to determine the existence, nature, and/or extent of contamination the facility; or No, further investigation is not necessary to determine the existence, nature, and/or extent of contamination at the facility. X I am exempt from completing the checklist and/or from resulting followup work. [Please state reason for exemption below and supply documentary evidence (see instructions)]. Explanation: Facility completed a Phase I Assessment dated May 1996 by Kennedy/Jenks Consultants. "Under penalty of perjury, I certify that I have personally examined and am familiar with the information submitted in this document and all attachments, and based on my inquiry of those individuals immediate responsible for obtaining it, the information is true, accurate, and complete to the best of who knowledge. The informed, I certify to my best judgement that the conclusion recorded above regarding further investigation exemption from completion of the Phase I Environmental Assessment is correct. S.M. Kavale, Project Myv Wildown Realth, Company Wildown Realth, Company Owner's Signature Name, Title, and Company Name Date Or: Operator's Signature Name, Title, and Company Name Date Or: None Operator's Signature Name, Title, Registration Number Date Name, Title, Registration Number Date	who is lines be	Either the owner, operator, or independent professional engineer, geologist, or an en registered in the State of California, shall certify to the following statement by signinglow:		
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